Vanderbilt Sterile Products

Standard Operating Procedure (SOP) for Cefazolin 1 gram/10ml OR Syringes

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Purpose
This document describes the proper Procedure for preparing Cefazolin for use in the operating room.

References

Scope
This SOP applies to staff members involved in preparation of Cefazolin for use in the operating room.

Allowable Exceptions
This SOP is meant to be followed without deviation.

Procedure
Obtain the following items:

- 1X 1000 ml Sterile Water for Injection Bag (SWFI) (in IV room if one is not hanging) with time/date labels
- Determine the number of syringes to be made.
- 1X10 gram vials of Cefazolin for every 10-syringe increment
  - 1 reconstitution label for each vial (b)
  - 1 transfer set

Expiration: 14 days

Directions
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1. In a bin, place the Sterile Water, Cefazolin, and syringes along with a reconstitution label.
2. The technician should set up the repeater pump with the sterile water and calibrate it. Documentation should be noted on the repeater pump calibration log.
3. Each 10 gram Cefazolin vial should be reconstituted with 96 ml of SWFI by pumping the appropriate amount of fluid into the 60 ml syringes. The bin along with the reconstituted Cefazolin, completed reconstitution labels, and used syringes should be passed out for verification.
4. After verification of contents by the pharmacist, the reconstitution label will be affixed and tape shall be placed over it. Cefazolin vials will be sent back into the clean room.
5. Follow the instructions for operation of Rapid-Fill ASF, spiking the base solution as the Source Container.
6. Set Parameters as follows:
   Select Label (F1)/arrow down to correct label/TAB OVER to modify label
   i) **(DO NOT CHOOSE EDIT F2)**
   ii) Lot #: CEF + date  Expiration date: 30 days
       Barcode: 00000001158 (verify)
   iii) Hit Select (F1) Tab down to fill in:
        (1) # of syringes to be filled: 165
   iv) Volume of Syringe: 3.2ml
   v) Volume of Source Container: 554ml  Pause after 1 syringe
7. Select Prime (F2)
8. Select Run(F1)
9. Send out first syringe to be verified by pharmacist.
10. Select Continue (F1) to finish batch (after pharmacist verifies syringe
11. The syringe will be capped and placed back in the bin. The technician should sign dispensing labels.
12. All completed work, including syringes, should be passed out for final verification and application of labels by the pharmacist.
13. After labeling, should be bagged 10 each and placed in the walk-in refrigerator.

D. Training

1. Each staff member receives or has direct access to applicable Standard Operating Procedures (SOPs).
2. New staff is trained on applicable SOPs and related activities